POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Milumbek		65-41-61
O.I.P.E. CLASSIFIER		WELL	5/25/01
FORMALITY REVIEW	JM	TCBXU	2/30/1)
RESPONSE FORMALITY REVIEW	nel	1030	10.15-0
	MTE	954	3/11/02

## INDEX OF CLAMS

~	Rejected	Ν.	Non-elected
=	Allowed	Ι	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

Claim Date	Claim Date	Claim Date
B 12 C	riginal riginal	al all all all all all all all all all
Final Conginal Conginal Conginal Conginal Conginal Congression Con	Original Colonginal	Original
直		
Builting of the state of the st	51 + + + + + + + + + + + + + + + + + + +	101
2300	52	102
, 3 1 0 0	53	103
1-1411-0-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	54	104
\ <del>-\_\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</del>	55	105
6 0 0	56	<del></del>
		106
l	57	107
8 0 0	58	108
9 0	59	109
10	60	110
11 0	61	111
12 / /	62	112
13	63	113
14 7 -	64	114
15 7	65	115
16	66	116
17	67	117
18	68	118
<u> </u>		
19	69	119
20	70	120 0
21	71 }	121   121
22	72	122
23	73	123
24	74	124
25	75	125
26	76	126
27 5		127
23 28 28	78	128
29	79	129
<del>▎</del> <del>▗</del> ▘ <del>▘</del>		
30 1	80	130
31	81	131
32	(83)	132
33	83	133
34	(8)	134
35	V85	135
36	96	136
37	(87)	137
38	88	138
39	89	139
40	90	140
41		141
42	92	142
43		143
	93	
44	94	144
45	95	145
46	96	146
47	97	147
48	98	148
49 5 50 50 50 50 50 50 50 50 50 50 50 50 5	99	149
50 7 2 -	100	150

If more than 150 claims or 10 actions staple additional sheet here

(LEFT INSIDE)

**SEST AVAILABLE COPY** 

3/10/